



## Policies and Procedures

<b>Policy Title: Nondiscrimination Communication and Grievances</b>			
<b>Department Responsible</b> Compliance and Privacy	<b>Policy Code</b> THN 6.0	<b>Effective Date:</b> January 2017	<b>Next Review Date:</b> September 30, 2019
<b>Title of Person Responsible</b> Chief Compliance Officer	<b>Approval Council</b> THN Board of Managers		<b>Approved Date:</b> April 10, 2017

### PURPOSE

Triad Healthcare Network, LLC (THN) is committed to maintaining a culture that promotes integrity and compliance with all federal and state laws and regulations. The purpose of this policy is to implement Section 1557 of the Patient Protection and Affordable Care Act (ACA) ([42 U.S.C. 18116](#)), which prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in certain health programs and activities. Section 1557 provides that, except as provided in Title I of the ACA, an individual shall not, on the grounds prohibited under Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, the Age Discrimination Act of 1975, or Section 504 of the Rehabilitation Act of 1973, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under, any health program or activity, any part of which is receiving Federal financial assistance or under any program or activity that is administered by an Executive Agency or any entity established under Title I of the ACA.

### DEFINITIONS

TERM	DEFINITION
ACA	Also known as the Patient Protection and Affordable Care Act ( <a href="#">Pub. L. 111-148</a> , 124 Stat. 119 (2010) as amended by the Health Care and Education Reconciliation Act of 2010, <a href="#">Pub. L. 111-152</a> , 124 Stat. 1029 (codified in scattered sections of U.S.C.)).
ACO Participant	An entity identified by a Medicare-enrolled billing TIN through which one or more ACO providers/suppliers bill Medicare, that alone or together with one or more other ACO participants compose an ACO, and that is included on the list of ACO participants that is required under 42 C.F.R. § 425.118.
ACO Provider/Supplier	An individual or entity that: (1) is a provider or supplier under Medicare regulations; (2) is enrolled in Medicare; (3) bills for items and services furnished to Medicare fee-for-service beneficiaries during the agreement period under a Medicare billing number assigned to the TIN of an ACO participant; and (4) is included on the list of ACO providers/suppliers that is required under 42 C.F.R. § 425.118.
Taglines	Short statements written in non-English languages that indicate the availability of language assistance services free of charge.
Workforce	Employees, volunteers, trainees, and other persons whose conduct, in the performance of work for a covered entity or business associate, is under the direct control of such covered entity or business associate, whether or not they are paid by the covered entity or business associate.



## **POLICY**

THN Workforce shall not exclude beneficiaries, enrollees, and prospective members or treat them differently because of their race, color, national origin, age, sex, or disability. THN shall take steps to notify beneficiaries, enrollees, and prospective members about their rights. THN shall

## **RESPONIBILITIES**

It is the responsibility of the Workforce to abide by this policy and the procedures herein.

### **Notice, Nondiscrimination Statement, and Taglines**

THN Workforce shall post a nondiscrimination Notice in English and post Translation Taglines in the top 15 non-English languages spoken by individuals with limited English proficiency of the state of North Carolina. The Notice and Taglines must be posted in:

- Conspicuously-visible font size in a conspicuous location of covered entity websites accessible from the home page,
- Conspicuous physical locations where the entity interacts with the public. Section 1557, 92.8 (f)(1)(i)-(iii).
- Significant communications and publications, which include:
  - All marketing materials;
  - Ad hoc enrollee communications that include information related to health coverage, benefits, and prescription drug coverage;
  - Annual Notice of Change (ANOC)/Evidence of Coverage (EOC);
  - Provider/pharmacy directories,
  - Part C and Part D Explanation of Benefits (EOB);
  - Formularies;
  - Enrollment Forms;
  - Summary of Benefits; and
  - Appeals and grievance notices.
- Significant publications that are small-size, such as trifold brochures, shall include a nondiscrimination statement and taglines in at least the top 2 non-English languages spoken by individuals with limited English proficiency in North Carolina.

### **Medicare Marketing Guidelines**

All marketing materials shall include a Tagline to inform Individuals with limited English proficiency of language assistance services. It shall read, "ATTENTION: If you speak [insert language], language assistance services, free of charge, are available to you. Call 1-xxx-xxx-xxxx (TTY: 1-xxx-xxx-xxxx)".

### **Grievances and Compliance**

Each covered entity shall take appropriate initial and continuing steps to notify beneficiaries, enrollees, applicants, and members of the public of the following:

- The covered entity does not discriminate on the basis of race, color, national origin, sex, age, or disability in its health programs and activities;
- The covered entity provides appropriate auxiliary aids and services, including qualified interpreters for individuals with disabilities and information in alternate formats, free of charge and in a timely manner, when such aids and services are necessary to ensure an equal opportunity to participate to individuals with disabilities;
- The covered entity provides language assistance services, including translated documents and oral interpretation, free of charge and in a timely manner, when such services are necessary to provide meaningful access to individuals with limited English proficiency;
- How to obtain the aids and services in paragraphs (a)(2) and (3) of this section;
- An identification of, and contact information for, the responsible employee designated to investigate grievances and coordinate the entity's compliance;
- The availability of the grievance procedure and how to file a grievance; and
- How to file a discrimination complaint with OCR in the Department.

**REFERENCE DOCUMENTS/LINKS**

- Section 1557 of the Patient Protection and Affordable Care Act (ACA) ([42 U.S.C. 18116](#))
- Cone Health Policy: Nondiscrimination Communication and Grievances Statement

**COMMITTEE APPROVAL: THN Compliance and Integrity Committee**

**ATTACHEMENT**

N/A

**PREVIOUS REVISION/REVIEW DATES**

Date	Reviewed	Revised	Notes
April 10, 2017	N/A	N/A	Approved as new policy by C&I Committee